

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N07653

1. Entity Name

VIETNAM VETERANS OF AMERICA CHAPTER 127, INC., M
ARTIN COUNTY, FLORIDA

Principal Place of Business

Mailing Address

5607 PALMETTO
FT PIERCE FL 34982
US

5607 PALMETTO
FT PIERCE FL 34982
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 13-3030278

Applied For

Not Applicable

5. Certificate of Status Desired

~~\$8.75~~ Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HUDSON, BRUCE D
5607 PALMETTO DR
FT PIERCE FL 34482

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME MANNIN, THOMAS F
STREET ADDRESS 2117 SW IMPORT DR
CITY-ST-ZIP PORT SAINT LUCIE FL 34953 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
N/A

TITLE VD
NAME HENRY, DARYL
STREET ADDRESS 1166 NW 13TH TERR
CITY-ST-ZIP STUART FL 34994-9679 ☐ Delete

TITLE VD
NAME JOHN W. HADDOX
STREET ADDRESS 8686 SE ALGOZZINI
CITY-ST-ZIP HOBE SOUND FL. 33455 ☒ Change ☐ Addition

TITLE VD
NAME VAROLI, STEVEN F
STREET ADDRESS 3133 BERRY AVENUE
CITY-ST-ZIP PALM CITY FL 34990 ☐ Delete

TITLE TD
NAME STEVE VAROLI
STREET ADDRESS 3133 BERRY AVE.
CITY-ST-ZIP PALM CITY FL. 34990 ☒ Change ☐ Addition

TITLE TD
NAME EARLY, RODNEY S
STREET ADDRESS 7008 SE CUTLER TRL
CITY-ST-ZIP STUART FL 34997 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
N/A

TITLE S
NAME HUDSON, BRUCE D
STREET ADDRESS 5607 PALMETTO DRIVE
CITY-ST-ZIP FT PIERCE FL 34982 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

BRUCE D HUDSON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/02

Date

561-465-5777

Daytime Phone #

CR2E037 (9/01)